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**Effective on 12/08/2004.**  
**Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).**

**Complete if Known**

Application Number	10/685,134
Filing Date	10/14/2003
First Named Inventor	James F. Zucherman
Examiner Name	Mary C. Hoffman
Art Unit	3733
Attorney Docket No.	SFMTD-05009US1

**METHOD OF PAYMENT** (check all that apply)

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## 1. BASIC FILING, SEARCH, AND EXAMINATION FEES

## 2. EXCESS CLAIM FEES

<u>Fee (\$)</u>	<u>Small Entity Fee (\$)</u>
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50      25

at 200 100

360      180

<b><u>Multiple Dependent Claims</u></b>	
<b><u>Fee (\$)</u></b>	<b><u>Fee Paid (\$)</u></b>

HP = highest number of independent claims paid for, if greater than 3


### 3. APPLICATION SIZE FEE

<u>Total Sheets</u>	<u>Extra Sheets</u>	<u>Number of each additional 60 or fraction thereof</u>	<u>Fee (\$)</u>	<u>Fee Paid (\$)</u>
_____ - 100 = _____	_____ / 50 = _____	(round up to a whole number) x _____	_____ = _____	_____

**4. OTHER FEE(S)****Fees Paid (\$)**

**455.00**

SUBMITTED BY

Signature		Registration No. (Attorney/Agent) 50.342	Telephone 415.362.3800
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